

Prescription Benefits At-A-Glance

Your prescription benefit will be administered by Caremark Inc.

The information below is a brief synopsis of your prescription benefits as well as some frequently asked questions about the Caremark prescription benefit program. The program is easy to use and will save you money. On behalf of Caremark and *Montgomery County*, we feel confident you will find value in your prescription benefit program.

| | RETAIL | MAIL SERVICE |
|---|--|--|
| WHEN: | For immediate medicine needs or short-term medicines | For maintenance or long-term medicines |
| WHERE: | At over 57,000 Caremark participating retail pharmacies nationwide, including 20,000 independent community pharmacies. To locate a Caremark participating retail pharmacy in your area, simply access the Pharmacy Locator at www.caremark.com or call Caremark Customer Care toll-free at 1-866-240-4926. | Simply mail your original prescription along with the mail service order form to Caremark and your medicines will be sent directly to your home. |
| HIGH OPTION YOU PAY: | \$4 for each generic prescription \$8 for each brand name prescription \$4 for each brand name prescription with no generic available | \$4 for each generic prescription \$8 for each brand name prescription \$4 for each brand name prescription with no generic available |
| STANDARD OPTION YOU PAY: | \$10 for each generic prescription \$20 for each brand name prescription on the primary drug list \$35 for each brand name prescription not on the primary drug list | \$10 for each generic prescription \$20 for each brand name prescription on the primary drug list \$35 for each brand name prescription not on the primary drug list |
| STANDARD OPTION ANNUAL DEDUCTIBLE: | \$50 per individual \$50 maximum per family | |
| DAY SUPPLY LIMIT: | 34-day supply | 102-day supply |
| CAREMARK CUSTOMER CARE: | 1-866-240-4926 or www.caremark.com | |

Your privacy is important to us. All our employees are trained regarding the appropriate way to handle your private health information.

(OVER) 13324-SUM01-1004

Frequently Asked Questions

ABOUT THE RETAIL PROGRAM

Q. Can I receive additional ID cards?

A. Additional ID cards may be obtained by contacting Caremark Customer Care toll-free at 1-866-240-4926.

Q. How many refills can I get at a retail pharmacy?

A. There is no limit on the number of refills you may obtain at a retail pharmacy for your long-term maintenance medicines. If you use the Caremark Mail Service Program for long-term medicines, you will pay only one co-payment* for up to a 102-day supply.

Q. May I obtain my medicine from a non-participating pharmacy?

A. In most instances, you will not need to visit a non-participating pharmacy because there are over 57,000 participating pharmacies in the Caremark program. When you choose to go to a non-participating pharmacy, you will pay 100 percent of the prescription price. You may then submit a paper claim form, along with the original prescription receipt(s), to Caremark for reimbursement of covered expenses.

Q. How do I switch my prescription from a non-participating pharmacy to a Caremark participating retail pharmacy?

A. Go to a Caremark participating retail pharmacy and tell the pharmacist where your prescription is currently on file. The pharmacist will contact the pharmacy and make the transfer for you.

Q. When should I use a retail pharmacy instead of the Caremark Mail Service Program?

A. You should use the retail pharmacy for your immediate medicine needs and for short-term medicines. Use your mail service program for your long-term maintenance medicines. Ask your doctor for two prescriptions when you need to take your maintenance medicines right away, one for up to a 34-day and one for up to a 102-day supply with refills when clinically appropriate. Have the short-term supply filled immediately at a Caremark participating retail pharmacy and send the 102-day supply prescription to Caremark.

ABOUT THE MAIL SERVICE PROGRAM

Q. Why should I use the Caremark Mail Service Program for my prescriptions?

A. The Caremark Mail Service Program provides a convenient and cost-effective way for you to order up to a 102-day supply of maintenance or long-term medicine for direct delivery to your home. By using your mail service program you minimize trips to the pharmacy while saving costs on your prescriptions.

Q. How long does it take for my prescriptions to arrive by mail?

A. You can expect to receive your prescription approximately 14 calendar days after Caremark receives your order.

Q. How do I check on the status of my order?

A. Check your refill order status at **www.caremark.com** or by dialing the Caremark toll-free number, **1-866-240-4926**, on your touch-tone phone. Caremark.com is available 24 hours a day, seven days a week.

Q. How should I ask my doctor to write my prescription to receive the maximum benefit from the Caremark Mail Service Program?

A. Remind your doctor to write "102-day supply plus refills", when clinically appropriate, for maintenance medicines that are purchased through the Caremark Mail Service Program. Caremark must fill your prescription for the exact quantity of medicine that your doctor prescribes, up to your plan design limit.

ABOUT THE CAREMARK PRIMARY DRUG LIST PROGRAM

Q. What is a primary drug list?

A. A primary drug list is a list of preferred prescription medicines that have been chosen because of their clinical effectiveness, safety and cost. The primary drug list promotes the use of generic medicine whenever possible. Generic medicines are therapeutically equivalent to brand name medicines and must be approved by the U.S. Food and Drug Administration for safety and effectiveness.

Q. Where can I obtain a primary drug list brochure?

A. You can obtain a primary drug list brochure by either accessing www.caremark.com or by contacting Caremark Customer Care toll-free at 1-866-240-4926.

[†] Co-payment or co-pay means the amount a participant is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.